#### Case 17-81868 Doc 1 Filed 08/10/17 Entered 08/10/17 11:44:45 Desc Main Document Page 1 of 53

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

#### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Bring iden	e the name that is on a government-issued ure identification (for mple, your driver's use or passport).  g your picture tification to your ting with the trustee.	Brian First name  C. Middle name  Jeffreys Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer tification number	xxx-xx-9313	

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Debtor 1 Brian C. Jeffreys

		About Debtor 1:	A	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names an Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs.  Business name(s)	☐ I have not used any business name or EINs.  Business name(s)			
		EINs	E	EINs		
5.	Where you live	1124 17th Street Rockford, IL 61104	H	f Debtor 2 lives at a different address:		
		Number, Street, City, State & ZIP Code	N	Jumber, Street, City, State & ZIP Code		
		Winnebago County	_	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If ii	f Debtor 2's mailing address is different from yours, fill it n here. Note that the court will send any notices to this nailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	N	Jumber, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	C	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Case number (if known) Debtor 1 Brian C. Jeffreys

ar	t 2: Tell the Court About	Your B	ankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> f page 1 and check the appropria	/ 11 U.S.C. § 342(b) for Individuals Filing for Banki ate box.	ruptcy	
	choosing to file under	☐ Chapter 7						
		☐ CI	hapter 11					
		☐ CI	hapter 12					
		■ Cł	hapter 13					
3.	How you will pay the fee	_	about how yo	u may pay. Typ attorney is subi	pically, if you are paying the fee y	ck with the clerk's office in your local court for mor yourself, you may pay with cash, cashier's check, on half, your attorney may pay with a credit card or ch	or money	
						ion, sign and attach the Application for Individuals	to Pay	
			Ū		ts (Official Form 103A).	on only if you are filing for Chapter 7. By law, a jud	lae may	
			but is not requapplies to you	uired to, waive y ur family size ar	your fee, and may do so only if ynd you are unable to pay the fee	our income is less than 150% of the official povert in installments). If you choose this option, you mustical Form 103B) and file it with your petition.	y line that	
9.	Have you filed for bankruptcy within the	■ No						
	last 8 years?	☐ Ye	S.					
			District			Case number		
			District		When			
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ No	)					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	S.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your	□ No	Go to li	ine 12.				
	residence?	■ Ye	s. Has yo	ur landlord obta	ained an eviction judgment agair	st you and do you want to stay in your residence?		
		. •		No. Go to line	12.			
			_	Yes. Fill out <i>In</i> bankruptcy per		Judgment Against You (Form 101A) and file it wit	h this	

Case 17-81868 Doc 1 Filed 08/10/17 Entered 08/10/17 11:44:45 Desc Main Document Page 4 of 53 Case number (if known) Debtor 1 Brian C. Jeffreys Part 3: Report About Any Businesses You Own as a Sole Proprietor Are you a sole proprietor ■ No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

INO.

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Brian C. Jeffreys

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 Brian C. Jeffreys **Answer These Questions for Reporting Purposes** Part 6: Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million **\$0 - \$50,000** □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Brian C. Jeffreys Signature of Debtor 2 Brian C. Jeffreys Signature of Debtor 1 Executed on August 10, 2017 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1 Brian C. Jeffreys

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Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Daniel A. Sprin	ger	Date	August 10, 2017
Signature of Attorney	for Debtor		MM / DD / YYYY
Daniel A. Springer Printed name			
Springer Law Firm	1		
Firm name			
2222 E State St			
Suite 107			
Rockford, IL 61104	1		
Number, Street, City, State &	ZIP Code		
Contact phone 815.31	2.4725	Email address	dspringerlaw@gmail.com
6314059			
Bar number & State			

			THE FAUL O ULSS	
Fill in this infor	mation to identify your	case:		
Debtor 1	Brian C. Jeffreys			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your as Value o	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	500.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	29,500.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	30,000.00
Pa	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	12,600.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	47,325.25
	Your total liabilities	\$	59,925.25
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,934.36
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,629.00
Pa	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	nedules.
	■ Yes What kind of debt do you have?		

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.

1,915.06

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

	С	ase 17-8186	B Doc 1 F	Filed 08/1 Docume		Entered 08/10/17 Page 10 of 53	7 11:44:45	Des	с Ма	ain
Fill	in this info	rmation to identify	your case and th			1 1111. 10 (11 30				
Del	otor 1	Brian C. Jef	reys Middle	Name		Last Name				
	otor 2 ouse, if filing)	First Name	Middle			Last Name				
Uni	ted States B	ankruptcy Court for	the: NORTHERI	N DISTRICT C	OF ILLIN	NOIS				
Cas	se number					-		I		heck if this is an mended filing
		orm 106A/E le A/B: Pi	-							12/15
hink nfor Ansv	k it fits best. rmation. If mo wer every que	Be as complete and ore space is needed, estion.	accurate as possible attach a separate sh	e. If two married neet to this form	d people n. On the	an asset fits in more than one e are filing together, both are e e top of any additional pages, vn or Have an Interest In	qually responsib	le for sup	plying	correct
D	o vou own or	have any legal or eq	uitable interest in a	nv residence. b	uilding	land, or similar property?				
_	No. Go to P		artable interest in a	ny rooidonoo, b	unumg,	iana, or ominar property.				
1.1	Yes. Where	is the property?		What is the p	property	/? Check all that apply				
	8616 We	Cemetery st State Street s, if available, or other des	cription	Duple:		nome ti-unit building or cooperative	Do not deduct se the amount of ar Creditors Who H	y secured	claims	on Schedule D:
	Winneba	go IL	61088-0000 ZIP Code	Land	factured	or mobile home	Current value o entire property?			nt value of the n you own?
	Ony	oldie	211 0000	☐ Times ☐ Other	share <b>Ce</b>	metery Plot tin the property? Check one	Describe the na	ture of yo		,
				_	or 1 only		Fee simple			
	County	go		Debto At leas	st one of	Debtor 2 only f the debtors and another ou wish to add about this item	Check if th		nunity	property
				property ide	ntificati		, such as local			

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for

someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

pages you have attached for Part 1. Write that number here......

Official Form 106A/B Schedule A/B: Property page 1

\$500.00

Deb	tor 1		: 17-818 C. Jeffrey		Doc 1	Filed 08/ Docum			tered ( e 11 o	08/10/1 f 53 <sub>Case</sub>	.7 11:4		De	sc Main
3. <b>C</b>	ars. var				ilitv vehi	cles, motorcyc	les							
		,	,	, -		, , , , , , , , ,								
	No													
	Yes													
3.1	Make		rysler			Who has an inte		ne prope	rty? Check	one	the amo	unt of any	secure	aims or exemptions. Put d claims on Schedule D:
	Mode					Debtor 1 only					Creditor	s Who Ha	ve Claii	ns Secured by Property.
	Year:	200 eximate m		150,	000	Debtor 2 only						value of the roperty?	the	Current value of the portion you own?
		informatio		130,	000	☐ Debtor 1 and ☐ At least one o		•			entire p	ropertyr		portion you own?
	001					At least one o	ii iile debii	tors and a	anounei					
						Check if this (see instruction		nunity pro	operty			\$6,775	.00	\$6,775.00
5 A	ages y	ou have	attached f	or Part 2.	Write th	for all of your e at number here								\$6,775.00
			r Personal											
Doy	you ow	n or hav	e any lega	or equit	able inte	rest in any of th	ne follow	ving ite	ms?				<b>1</b>	Current value of the portion you own? On not deduct secured claims or exemptions.
E	<i>xample</i> No				, linens, c	china, kitchenwa	re							
			Н	ousehol	d Furnit	ture								\$250.00
	] No	s: Televi	ing cell pho			, stereo, and dig dia players, gam		ipment; (	computers	s, printers,	scanners	; music c	ollectio	ons; electronic devices
			3	TV's, 5 (	Cellpho	nes, 1 Compu	ıter, 1 T	Γablet,	1 Wii Ga	me Con	sole			\$520.00
E	xample No		es and figu collections,				work; boo	ooks, pic	tures, or o	other art ob	bjects; sta	mp, coin,	or bas	seball card collections;
			В	ooks, Pi	ctures,	Home Decor								\$45.00
E	xample ■ No	s: Sports	al instrume	phic, exer	cise, and	other hobby equ	uipment;	bicycles	s, pool tab	oles, golf c	lubs, skis;	canoes a	and ka	yaks; carpentry tools;

Official Form 106A/B Schedule A/B: Property page 2

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Official Form 106A/B Schedule A/B: Property page 3

Institution or issuer name:

No

☐ Yes.....

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Case number (if known) Document Debtor 1 Brian C. Jeffreys 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☐ Yes. Give specific information.....

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30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Secular Description (Insurance payments) and the properties of the prope

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' competent benefits; unpaid loans you made to someone else	ensation, Social Security
■ No □ Yes. Give specific information	
<ul> <li>31. Interests in insurance policies         Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insura         No     </li> </ul>	ance
☐ Yes. Name the insurance company of each policy and list its value.	
Company name:  Beneficiary:	Surrender or refund value:
32. Any interest in property that is due you from someone who has died  If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to recommend to someone has died.  ■ No	ceive property because
☐ Yes. Give specific information	
<ul> <li>33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue</li> <li>□ No</li> <li>■ Yes. Describe each claim</li> </ul>	
Personal Injury Claim	\$21,000.00
■ No □ Yes. Describe each claim  35. Any financial assets you did not already list ■ No □ Yes. Give specific information	
36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$21,010.00
Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
37. Do you own or have any legal or equitable interest in any business-related property?	
No. Go to Part 6.	
Yes. Go to line 38.	
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.  If you own or have an interest in farmland, list it in Part 1.	
46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
■ No. Go to Part 7.	
☐ Yes. Go to line 47.	
Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53. Do you have other property of any kind you did not already list?  Examples: Season tickets, country club membership	
■ No	
☐ Yes. Give specific information	
54. Add the dollar value of all of your entries from Part 7. Write that number here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

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Case number (if known) Document Debtor 1 Brian C. Jeffreys

Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$500.00 Part 2: Total vehicles, line 5 56. \$6,775.00 Part 3: Total personal and household items, line 15 57. \$1,715.00 Part 4: Total financial assets, line 36 58. \$21,010.00 Part 5: Total business-related property, line 45 59. \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$29,500.00 Copy personal property total \$29,500.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$30,000.00

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor	rmation to identify your	case:		
Debtor 1	Brian C. Jeffreys			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Ide	entify the	Property You	u Claim as	Exempt
-------------	------------	--------------	------------	--------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	portion you own	AIII	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2005 Chrysler 300 150,000 miles Line from Schedule A/B: 3.1	\$6,775.00		\$2,400.00	735 ILCS 5/12-1001(c)
Line Holli Golledale A/D. 3.1			100% of fair market value, up to any applicable statutory limit	
Household Furniture Line from Schedule A/B: 6.1	\$250.00		\$250.00	735 ILCS 5/12-1001(b)
Line Holli Schedule Arb. 6.1			100% of fair market value, up to any applicable statutory limit	
3 TV's, 5 Cellphones, 1 Computer, 1 Tablet, 1 Wii Game Console	\$520.00		\$520.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Books, Pictures, Home Decor	\$45.00		\$45.00	735 ILCS 5/12-1001(b)
Line Holli Schedule A/B. 0.1			100% of fair market value, up to any applicable statutory limit	
.9 mm Handgun Line from Schedule A/B: 10.1	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
Line Hom Schedule A/D. 10.1			100% of fair market value, up to any applicable statutory limit	

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Debtor 1 Brian C. Jeffreys

	Briair C. Com Cyc				
	f description of the property and line on edule A/B that lists this property	Current value of the portion you own	e Amount of the exemption you claim		Specific laws that allow exemption
		Copy the value from Schedule A/B	Che		
	ed Clothing from Schedule A/B: 11.1	\$300.00		\$300.00	735 ILCS 5/12-1001(a)
LIIIC	TIOTH Suredule A/B. 1111			100% of fair market value, up to any applicable statutory limit	
Rin	gs from Schedule A/B: 12.1	\$400.00		\$400.00	735 ILCS 5/12-1001(b)
Line	HOIH Scredule A/B. 12.1			100% of fair market value, up to any applicable statutory limit	
Cas	sh from Schedule A/B: <b>16.1</b>	\$10.00		\$10.00	735 ILCS 5/12-1001(b)
Line	HOM Scriedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit	
	sonal Injury Claim	\$21,000.00		\$15,000.00	735 ILCS 5/12-1001(h)(4)
Line Hori Schedule AVB. 33.1				100% of fair market value, up to any applicable statutory limit	
	you claiming a homestead exemption bject to adjustment on 4/01/19 and every			led on or after the date of adjustmer	nt.)
	No				
	Yes. Did you acquire the property cover	red by the exemption w	ithin 1	,215 days before you filed this case	?
	□ No				
	☐ Yes				

		Document	Page 18	3 of 53	<u></u>	
Fill in this informa	tion to identify you	ur case:				
Debtor 1	Brian C. Jeffrey	/S				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bank	ruptcy Court for the	: NORTHERN DISTRICT OF	ILLINOIS			
Case number					_	if this is an ded filing
Official Form	106D					
		· Who Have Claims	Socuror	hy Proporty	,	40/45
Schedule D	creditors	Who Have Claims	<u>s secured</u>	a by Property	<u> </u>	12/15
		If two married people are filing togo out, number the entries, and attach				
. Do any creditors ha	ve claims secured b	y your property?				
☐ No. Check th	nis box and submit t	his form to the court with your oth	ner schedules. Yo	ou have nothing else to	report on this form.	
_	I of the information	•		o o	•	
	Secured Claims	5010W.				
			Pr	Column A	Column B	Column C
for each claim. If more	e than one creditor has	more than one secured claim, list the s a particular claim, list the other creditical order according to the creditor's national order.	tors in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Citizens Fin	ance	Describe the property that secure	es the claim:	\$12,600.00	\$6,775.00	\$5,825.00
Creditor's Name		2005 Chrysler 300 150,000	) miles			
Attn: Bankr 6457 N 2nd	St	As of the date you file, the claim apply.	is: Check all that			
Loves Park,	<u> </u>	☐ Contingent				
Number, Street, Ci	ty, State & Zip Code	☐ Unliquidated				
Who owes the debt	? Check one.	☐ Disputed  Nature of lien. Check all that apple	V.			
■ Debtor 1 only		■ An agreement you made (such a	•	ured		
Debtor 2 only		car loan)	as mortgage or see	Jaroa		
Debtor 1 and Debt	or 2 only	☐ Statutory lien (such as tax lien, r	mechanic's lien)			
☐ At least one of the		☐ Judgment lien from a lawsuit	,			
☐ Check if this clair	n relates to a	Other (including a right to offset)	)			
community debt						
Date debt was incurr	ed <b>7/2015</b>	Last 4 digits of account nu	ımber			
Add the dollar valu	e of your entries in C	Column A on this page. Write that nu	umber here:	\$12,60	0.00	
If this is the last pa Write that number		the dollar value totals from all page	es.	\$12,60	0.00	
	iici c.					
Part 2: List Other	rs to Be Notified for	or a Debt That You Already List	ed			
trying to collect from	you for a debt you o	pe notified about your bankruptcy for owe to someone else, list the credit t you listed in Part 1, list the addition nis page.	or in Part 1, and th	nen list the collection ag	ency here. Similarly, if	you have more
		, · J				
	, Street, City, State & vitzer, Long, Bal	·	On whic	ch line in Part 1 did you er	ter the creditor? 2.1	
	r Drive 1st Floor		Last 4 d	ligits of account number _	_	

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Debtor 1	Brian C. Jeffreys			Case number (if know)
	First Name	Middle Name	Last Name	
Wi 40 20	ime, Number, Street, City, innebago County ( 00 W State St 017 LM 476 ockford, IL 61101			On which line in Part 1 did you enter the creditor?

J	01000 1	Document Document	Page 20 of 53	1.44.40 000	, wan
Fill in this info	rmation to identify your				
Debtor 1	Brian C. Jeffreys				
Debior 1	First Name	Middle Name	Last Name	_	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	LINOIS		
Case number					
(if known)				☐ Ch	neck if this is an
				am	nended filing
	E/F: Creditors W	/ho Have Unsecured			12/15
any executory co Schedule G: Exec Schedule D: Cred eft. Attach the Co name and case n	ntracts or unexpired leases cutory Contracts and Unexp ditors Who Have Claims Sec ontinuation Page to this pag umber (if known).	that could result in a claim. Also li bired Leases (Official Form 106G). D sured by Property. If more space is a ge. If you have no information to rep	'Y claims and Part 2 for creditors wit ist executory contracts on Schedule to not include any creditors with par needed, copy the Part you need, fill i port in a Part, do not file that Part. Or	A/B: Property (Official tially secured claims to it out, number the entr	Form 106A/B) and on hat are listed in ies in the boxes on the
	All of Your PRIORITY Ur				
_ ′	itors have priority unsecure	ed claims against you?			
No. Go to	Part 2.				
☐ Yes.					
	All of Your NONPRIORIT				
3. Do any cred	itors have nonpriority unsec	cured claims against you?			
☐ No. You h	nave nothing to report in this p	part. Submit this form to the court with	your other schedules.		
Yes.					
unsecured cla	aim, list the creditor separatel	y for each claim. For each claim listed	e creditor who holds each claim. If a I, identify what type of claim it is. Do no have more than three nonpriority unsec	t list claims already inclu	uded in Part 1. If more
					Total claim
4.1 <b>ABD F</b>	CU	Last 4 digits of acc	ount number		\$806.00
•	rity Creditor's Name			<del>-</del>	
	Bankruptcy Dept Mound Rd	When was the debt	Incurred?		
	n, MI 48092-4561	As af the data was	file the plains in O. J. H. H. J.		
	Street City State Zlp Code curred the debt? Check one.		file, the claim is: Check all that apply		
_					
_	for 1 only	☐ Contingent			
	or 2 only	Unliquidated			
	or 1 and Debtor 2 only	☐ Disputed	NTV d als ' ::		
	ast one of the debtors and an		RITY unsecured claim:		
	ck if this claim is for a com				
debt Is the cl	laim subject to offset?	☐ Obligations arising priority clai	ng out of a separation agreement or div	orce that you did not	
■ No	•		or profit-sharing plans, and other simil	ar debts	
☐ Yes		Other. Specify	1 01 ,		
∟ res		Other. Specify	i Gigoriai Luari		

Best Case Bankruptcy

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Debtor 1 Brian C. Jeffreys Case number (if know) 4.2 AT&T Last 4 digits of account number \$1.187.00 Nonpriority Creditor's Name PO Box 6416 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Utilities ☐ Yes 4.3 \$300.00 Comcast Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 3005 Southeastern, PA 19398 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Services ☐ Yes 4.4 ComEd Last 4 digits of account number \$877.00 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 10/2001 PO Box 6111 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Utlities ☐ Yes

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Case number (if know)

Debto	Brian C. Jeffreys	Case number (if know)	
4.5	Convergent Outsourcing	Last 4 digits of account number	\$989.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 9004 Renton, WA 98057	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<u> </u>		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collecting for Creditor	
4.6	Debt Recovery Solutions  Nonpriority Creditor's Name	Last 4 digits of account number	\$425.00
	Attn: Bankruptcy Dept. 900 Merchants Conc Suite 106 Westbury, NY 11590	When was the debt incurred?	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collecting for Creditor	
4.7	Direct TV Nonpriority Creditor's Name	Last 4 digits of account number	\$300.00
	PO Box 5007 Carol Stream, IL 60197	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Services	

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Case number (if know) Debtor 1 Brian C. Jeffreys \$300.00 4.8 **Dish Network LLC** Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 9601 S Meridian Blvd Englewood, CO 80112-5905 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify services ☐ Yes 4.9 IL Dept of HC & Family Services Last 4 digits of account number \$362.00 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. 509 South Sixth Street Springfield, IL 62701 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Bills** Other. Specify 4.1 **Mercy Health System** \$761.00 Last 4 digits of account number Nonpriority Creditor's Name 1000 Mineral Point Avenue When was the debt incurred? Janesville, WI 53548 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes

Document Page 24 of 53 Debtor 1 Brian C. Jeffreys Case number (if know) 4.1 **Nicor Gas** \$933.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. 07/2017 When was the debt incurred? PO Box 5407 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Utilities 4.1 Ortholllinois \$3,068.00 Last 4 digits of account number 2 Nonpriority Creditor's Name Box 78620 When was the debt incurred? Milwaukee, WI 53278-8620 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.1 **OSF St. Anthony Med Center** \$21.369.25 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 5510 East State St. Rockford, IL 61108-2381 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

■ Other. Specify Medical Bills

report as priority claims

 $\square$  Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Debt	or 1 Brian C. Jeffreys	Case number (if know)	
4.1 4	Progressive Insurance	Last 4 digits of account number	\$733.00
	Nonpriority Creditor's Name 6300 Wilson Mills Road Cleveland, OH 44143	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Fees	
4.1 5	Rockford Anesthesiologists	Last 4 digits of account number	\$2,294.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 2202 Harlem Rd Loves Park, IL 61111	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bills	
4.1 6	Rockford Health System	Last 4 digits of account number	\$646.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 2400 N Rockton Ave Rockford, IL 61103	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	

■ No

☐ Yes

■ Other. Specify Medical Bills

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Document Page 26 of 53 Debtor 1 Brian C. Jeffreys Case number (if know) 4.1 **Rockford Memorial** \$655.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 08/2015 2400 N Rockton Ave Rockford, IL 61103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Debt ☐ Yes 4.1 **Security Finance Corporation** \$1,521.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 3146 Spartanburg, SC 29304 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Personal Loan ☐ Yes 4.1 Swedish American Health System \$425.00 9 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 1401 East State Street Rockford, IL 61104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Medical Bills

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	Case 17-01000 DOC 1	Description Description Description	ani
Debtor '	Brian C. Jeffreys	Document Page 27 of 53 Case number (if know)	
4.2			
0	United Credit Service	Last 4 digits of account number	\$4,687.00
	Nonpriority Creditor's Name PO Box 740	When was the debt incurred?	
	Elkhorn, WI 53121		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other Specify Collecting for Creditor	
	L res	Other. Specify Concesting for Creditor	
4.2	Voughn's TV & Appliance		\$4,687.00
	Vaughn's TV & Appliance Nonpriority Creditor's Name	Last 4 digits of account number	\$4,00 <i>1</i> .00
	3833 Auburn Rd	When was the debt incurred?	
	Rockford, IL 61101		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Broken Lease	
	_		
Part 3:		·	
is tryin have m	ng to collect from you for a debt you owe to s	about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a someone else, list the original creditor in Parts 1 or 2, then list the collection agency here nat you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional or submit this page.	. Similarly, if you
Name an	nd Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
Afni		Line 4.13 of (Check one):	
PO Bo	Bankruptcy Dept. ▼ 3007	■ Part 2: Creditors with Nonpriority Unsecured Claims	3
-	ington, IL 61702-3097		
		Last 4 digits of account number	
Name an	nd Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	& Weiner	Line 4.14 of (Check one):	
	Erwin Street and Hills, CA 91367	■ Part 2: Creditors with Nonpriority Unsecured Claims	3
	a 1	Last 4 digits of account number	
Name an	nd Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
Credite	ors Protection Service	Line 4.10 of (Check one):	
	Bankruptcy Dept. x 4115	■ Part 2: Creditors with Nonpriority Unsecured Claims	3
	A TIIJ		

Name and Address **Creditors Protection Service** 

Official Form 106 E/F

Rockford, IL 61101

On which entry in Part 1 or Part 2 did you list the original creditor?

 $\hfill \square$  Part 1: Creditors with Priority Unsecured Claims

Last 4 digits of account number

Line **4.12** of (*Check one*):

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Debtor 1 Brian C. Jeffreys		Case number (if know)
Attn: Bankruptcy Dept. PO Box 4115 Rockford, IL 61101		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Creditors Protection Service Attn: Bankruptcy Dept. PO Box 4115 Rockford, IL 61101	On which entry in Part 1 or Part 2 did Line 4.15 of ( <i>Check one</i> ):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	<del>-</del>	
Name and Address  Debt Recovery Solutions  Attn: Bankruptcy Dept.  900 Merchants Conc Suite 106  Westbury, NY 11590	On which entry in Part 1 or Part 2 did Line 4.19 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	<del>-</del>	
Name and Address Diversified Consultants Attn: Bankruptcy Dept. PO Box 551268 Jacksonville, FL 32255	On which entry in Part 1 or Part 2 did Line 4.2 of (Check one):	you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims  ■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Equifax PO Box 740256 Atlanta, GA 30374	On which entry in Part 1 or Part 2 did Line 4.20 of (Check one):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Experian PO Box 4500 Allen, TX 75013	On which entry in Part 1 or Part 2 did Line 4.20 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Franks, Gerkin, & McKenna P.C. Attn: Bankruptcy Dept. 19333 E Grant HWY Marengo, IL 60152	On which entry in Part 1 or Part 2 did Line 4.20 of (Check one):	you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims  ■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address IL Dept. of Healthcare & Family Ser PO Box 19174 Springfield, IL 62794	On which entry in Part 1 or Part 2 did Line 4.9 of ( <i>Check one</i> ):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Springheid, ic 02/34	Last 4 digits of account number	
Name and Address Ortholllinois 324 Roxbury Street Rockford, IL 61107	On which entry in Part 1 or Part 2 did Line 4.12 of (Check one):  Last 4 digits of account number	you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims  ■ Part 2: Creditors with Nonpriority Unsecured Claims
Nome and Address	On which entry in Dort 1 or Dort 2 did	very liet the existence are differed.
Name and Address Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108	On which entry in Part 1 or Part 2 did Line 4.13 of (Check one):	you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims  ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108	On which entry in Part 1 or Part 2 did Line <b>4.16</b> of ( <i>Check one</i> ):	you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims  ■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

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Debtor 1 Brian C. Jeffreys Case number (if know) Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **TransUnion** Line 4.20 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 555 West Adams Street ■ Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60661 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **United Credit Service** Line **4.21** of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims **PO Box 740** ■ Part 2: Creditors with Nonpriority Unsecured Claims Elkhorn, WI 53121 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Winnebago County Circuit Court Line 4.20 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 400 W State St ■ Part 2: Creditors with Nonpriority Unsecured Claims 2014 SC 3591 Rockford, IL 61101

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	<b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
	6f.	Student loans	6f.	Total Claim
Total	01.	Student loans	о.	\$ 0.00
claims from Part 2	0	Obligations spiriture out of a second in a second or discuss that		
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	· · · · · · · · · · · · · · · · · · ·	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 47,325.25
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 47,325.25

Last 4 digits of account number

			II FAUE SU ULSS	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Brian C. Jeffreys			
	First Name	Middle Name	Last Name	·
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3			Oldio	2.11 0000	
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5	·				
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>

		Docume	ent Page 31 o	<u>f 53</u>
Fill in this	information to identify your	case:		
Debtor 1	Brian C. Jeffreys			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, fili	ng) First Name	Middle Name	Last Name	
United Sta	ites Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case num	ber			
(if known)				☐ Check if this is an
				amended filing
Officia	l Form 106H			
	lule H: Your Cod	obtors		12/15
Scried	iule II. Toul Cou	EDIOIS		12/15
	and case number (if known) you have any codebtors? (If	, ,		as a codebtor.
■ No □ Yes	S			
	hin the last 8 years, have you na, California, Idaho, Louisiana,			y? (Community property states and territories include ngton, and Wisconsin.)
	. Go to line 3. s. Did your spouse, former spou	use, or legal equivalent liv	e with you at the time?	
in line Form	e 2 again as a codebtor only i	f that person is a guarar	ntor or cosigner. Make s	if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Officia 6G). Use Schedule D, Schedule E/F, or Schedule G to fi
	Column 1: Your codebtor Name, Number, Street, City, State and Zl	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
	•			
3.1	Nome			Schedule D, line
	Name			☐ Schedule E/F, line
_				☐ Schedule G, line
	Number Street	State	ZIP Code	_
	City	State	ZIP Code	
				Doda da D. Car
3.2	Name			Schedule D, line
				☐ Schedule E/F, line ☐ Schedule G, line
-	Number			
	Number Street City	State	ZIP Code	

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Fill	in this information to identify your c	ase:						
Del	otor 1 Brian C. Jef	freys						
	otor 2							
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_			
	se number nown)		-			☐ A supp	ended filing lement showi	ng postpetition chapter following date:
0	fficial Form 106I					MM / E	DD/ YYYY	
S	chedule I: Your Inc	ome						12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	ır spouse is not filing w	ith you, do not includ	de infor	mati	on about you	r spouse. If m	ore space is needed,
1.	Fill in your employment information.		Debtor 1		Deb	Debtor 2 or non-filing spouse		
	If you have more than one job, attach a separate page with	Employment status	■ Employed			_	Employed	
	information about additional employers.	Occupation	☐ Not employed  Warehouse				lot employed	
	Include part-time, seasonal, or self-employed work.	Employer's name	Pinnacle Logisti	ics				
	Occupation may include student or homemaker, if it applies.	Employer's address	5824 Kishwauke Rockford, IL 611		d			
		How long employed t	here? 8 month	าร				
Par	t 2: Give Details About Mor	nthly Income						
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	eport for	any	line, write \$0 ii	n the space. In	clude your non-filing
	u or your non-filing spouse have me e space, attach a separate sheet to		ombine the information	n for all e	emplo	oyers for that p	erson on the	lines below. If you need
						For Debtor 1		ebtor 2 or ling spouse
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	966	38 \$	0.00
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0	.00 +\$	0.00

966.38

0.00

Calculate gross Income. Add line 2 + line 3.

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Deb	otor 1	Brian C. Jeffreys	-	Case	number (if known)			
				Foi	r Debtor 1	non-fi	ebtor 2 or iling spouse	
	Cop	y line 4 here	4.	\$_	966.38	\$	0.00	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	117.02	\$	0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	0.00	
	5e.	Insurance	5e.	\$_ \$	0.00	\$	0.00	
	5f. 5g.	Domestic support obligations Union dues	5f. 5g.	\$ \$	0.00	\$	0.00	
	5g. 5h.	Other deductions. Specify:	5g. 5h.+	\$ _	0.00	+ \$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$	117.02	\$	0.00	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	849.36	\$	0.00	
8.	8b. 8c. 8d. 8e. 8f.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Food Assistance	8c. 8d. 8e.	\$_ \$_ \$_ \$_	0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00	
		medical card		\$	0.00	\$	1.00	
	8g.	Pension or retirement income	 8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify: Tax Refund	8h.+	\$	200.00	+ \$	0.00	
		Contribution from Son		\$	300.00	\$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	500.00	\$	585.00	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		1,349.36 + \$_	58	5.00 = \$1	1,934.36
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a cify:	depend		•		hedule J. 11. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies						1,934.36
13.		you expect an increase or decrease within the year after you file this form No.	?				Combine monthly	
	П	Yes, Explain:						

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E III	in this informs	ition to identify yo	211, 22221					
Deb	tor 1	Brian C. Jeff	reys			Ch □	eck if this is:  An amended filing	1
	tor 2 ouse, if filing)						A supplement sho	wing postpetition chapter f the following date:
Unit	ed States Bankı	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
	e number							
Of	fficial Fo	rm 106J						
So	chedule	J: Your	Exper	ses				12/1
Be info	as complete ormation. If m	and accurate as	possible eded, atta	If two married people and the control of the contro				
Par		ribe Your House	ehold					
1.	Is this a joir							
			in a separ	ate household?				
	□N	0	•					
	□Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of De	ebtor 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Daughter			Yes
					Daughter		16	□ No ■ Yes
					Son		20	□ No ■ Yes
								_ □ No
_	_							Yes
3.	expenses o	oenses include f people other t d your depende	han $_{\square}$	No Yes				
Est exp	imate your ex		our bankr	uptcy filing date unless y				napter 13 case to report of the form and fill in the
the		h assistance an		government assistance i luded it on <i>Schedule I:</i> \			Your exp	penses
4.		or home owners and any rent for th		ses for your residence. I r lot.	nclude first mortgag	e 4.	\$	300.00
	If not include	led in line 4:						
	4a. Real	estate taxes				4a.	\$	0.00
		rty, homeowner's				4b.		0.00
		maintenance, reconner's associat	•	ipkeep expenses		4c. 4d.		0.00
5				oominium dues our residence, such as ho	me equity loans	4u. 5.	·	0.00

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Debtor 1 Brian C. Je	ttreys	Case num	ber (if known)	
6. Utilities:				
	at, natural gas	6a.	\$	210.00
	, garbage collection	6b.		40.00
,	ell phone, Internet, satellite, and cable services	6c.		120.00
6d. Other. Specif	•	6d.	·	0.00
7. Food and houseke		7.	\$	584.00
	dren's education costs	8.	\$	0.00
9. Clothing, laundry,		9.		45.00
10. Personal care prod		10.		55.00
11. Medical and denta		11.	·	0.00
	clude gas, maintenance, bus or train fare.	11.	Ψ	0.00
Do not include car p		12.	\$	185.00
	bs, recreation, newspapers, magazines, and books	13.	\$	0.00
	utions and religious donations	14.	·	0.00
5. Insurance.			·	0.00
	rance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance		15a.	\$	0.00
15b. Health insura	nce	15b.	\$	0.00
15c. Vehicle insura	ance	15c.	\$	90.00
15d. Other insuran	nce. Specify:	15d.	·	0.00
	de taxes deducted from your pay or included in lines 4 or 2			2.00
Specify:		16.	\$	0.00
7. Installment or leas		170	•	0.00
17a. Car payments		17a.	·	0.00
17b. Car payments		17b.		0.00
17c. Other. Specify		17c.	•	0.00
17d. Other. Specif		17d.	\$	0.00
	alimony, maintenance, and support that you did not re ir pay on line 5, Schedule I, Your Income (Official Forn		\$	0.00
	ou make to support others who do not live with you.		\$	0.00
Specify:		19.		
0. Other real property	expenses not included in lines 4 or 5 of this form or	on Schedule I: Yo	ur Income.	
20a. Mortgages or	n other property	20a.	\$	0.00
20b. Real estate ta	axes	20b.	\$	0.00
20c. Property, hon	neowner's, or renter's insurance	20c.	\$	0.00
20d. Maintenance,	repair, and upkeep expenses	20d.	\$	0.00
	s association or condominium dues	20e.	\$	0.00
1. Other: Specify:		21.		0.00
. , –			• •	0.00
2. Calculate your mo	, ,			4 000 00
22a. Add lines 4 thre	•	10010	\$	1,629.00
22b. Copy line 22 (r	monthly expenses for Debtor 2), if any, from Official Form	106J-2	\$	
22c. Add line 22a aı	nd 22b. The result is your monthly expenses.		\$	1,629.00
3. Calculate your mo	nthly net income.			
	(your combined monthly income) from Schedule I.	23a.	\$	1,934.36
• •	onthly expenses from line 22c above.	23b.		1,629.00
-177		320		.,
	monthly expenses from your monthly income.	00-	e e	305.36
The result is y	your monthly net income.	23c.	\$	303.30
24. Do you expect an i	increase or decrease in your expenses within the year	after you file this	form?	
	xpect to finish paying for your car loan within the year or do you ex			ase or decrease because of
modification to the tern		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	
■ No.				
	xplain here:			

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Fill in this	s information to identify your	case.			
		case.			
Debtor 1	Brian C. Jeffreys  First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fili	ling) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num	nber				
(if known)					☐ Check if this is an
					amended filing
Official	Form 106Dec				
Decla	aration About a	an Individual	Debtor's Sc	hedules	12/15
If two mar	ried people are filing togethe	r. both are equally respo	onsible for supplying corr	ect information.	
	and proper and annual regions.	·,,,,,			
	file this form whenever you fi				
obtaining vears or h	money or property by fraud in both. 18 U.S.C. §§ 152, 1341, 1	n connection with a ban IS19, and 3571	kruptcy case can result ii	n fines up to \$250,000, or	imprisonment for up to 20
years, or a	50111. 10 0.0.0. 33 132, 1341, 1	1015, and 3571.			
	Sign Below				
Did v	you pay or agree to pay some	one who is NOT an atto	rnev to help you fill out b	ankruptcy forms?	
,	, o a pay o. ag. oo to pay ooo		у со ногр уст сага		
	No				
	Yes. Name of person				cy Petition Preparer's Notice,
				Declaration, and	Signature (Official Form 119)
	r penalty of perjury, I declare	that I have read the sum	nmary and schedules filed	d with this declaration an	d
that th	they are true and correct.				
X /s	s/ Brian C. Jeffreys		X		
_	Brian C. Jeffreys		Signature of	Debtor 2	
S	Signature of Debtor 1				
ח	Date August 10, 2017		Date		
_					

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		nation to identify you				
De	btor 1	Brian C. Jeffreys First Name	Middle Name	Last Name		
	btor 2					
(Spo	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (	OF ILLINOIS		
1	se number				_	Check if this is an amended filing
St		of Financial	Affairs for Individ			4/1
info	rmation. If m		attach a separate sheet to		equally responsible for sup y additional pages, write you	
Pa	rt 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is your	r current marital statu	ıs?			
	<ul><li>■ Married</li><li>□ Not mar</li></ul>	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	_	• , •	•	·		
	□ No ■ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live nov	1.	
		, ,	·	ŕ		Detec Debter 2
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	aress:	Dates Debtor 2 lived there
	1611 Vikin Rockford,		From-To: <b>- 5/2017</b>	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
	es and territori  ■ No □ Yes. Ma	es include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	ity property state or territor ico, Texas, Washington and V	
Pa	Explai	n the Sources of You	r income			
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$6,690.37	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Case 17-81868 Doc 1 Filed 08/10/17 Entered 08/10/17 11:44:45 Desc Main Document Page 38 of 53 ase number (if known) Debtor 1 Brian C. Jeffreys Debtor 1 Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$6,763.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$1.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) For last calendar year: Pension/Annuity \$6,528.00 (January 1 to December 31, 2016) Distribution Unemployment \$11,328.00 List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? □ No. Go to line 7. ☐ Yes

List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

#### Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address **Dates of payment** Total amount Amount you Was this payment for ... still owe paid

<sup>\*</sup> Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

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Case number (if known) Document Debtor 1 Brian C. Jeffreys

	<ul><li>No</li><li>Yes. List all payments to an insider.</li></ul>							
	' '							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment		
	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cosi		ments or transfer a	any property on a	ccount of a d	ebt that benefited an		
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider</li></ul>							
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Peason for	this payment		
	misider s Name and Address	Dates of payment	paid	still owe	Include cred			
Part	4: Identify Legal Actions, Repossession	s, and Foreclosures						
	Within 1 year before you filed for bankrupto List all such matters, including personal injury of modifications, and contract disputes.							
	■ No □ Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency		Status of th	e case		
	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.							
	<ul><li>No. Go to line 11.</li><li>Yes. Fill in the information below.</li></ul>							
	Creditor Name and Address	Describe the Property		Date		Value of the property		
		Explain what happened	d			proposity		
i	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.		luding a bank or fii	nancial institution	, set off any a	amounts from your		
	Creditor Name and Address	Describe the action the	creditor took		action was	Amount		
	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or ar ■ No □ Yes		erty in the possess	taker		efit of creditors, a		
Part	5: List Certain Gifts and Contributions							
13.	Within 2 years before you filed for bankrupt ■ No	cy, did you give any gift	s with a total value	of more than \$60	0 per person	?		
	☐ Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value		
	Person to Whom You Gave the Gift and Address:							

		Case 17-81808 Duc		Deermont	Ellielen noltr	// Т / Т Т	44.45 Desi	Jiviaiii
Deb	tor 1	Brian C. Jeffreys		Document	Page 40 of 53	number (	if known)	
14.	<b>I</b>	n 2 years before you filed for banl No Yes. Fill in the details for each gift or			ifts or contributions wi	th a total	value of more than	\$600 to any charity
	Gifts more Char	s or contributions to charities that e than \$600 rity's Name ress (Number, Street, City, State and ZIP Co	total	Describe what y	ou contributed		Dates you contributed	Value
Part	t 6:	List Certain Losses						
		n 1 year before you filed for bankı mbling?	ruptcy or	since you filed fo	r bankruptcy, did you l	ose anyth	ning because of the	ft, fire, other disaste
	_	No Yes. Fill in the details.						
		cribe the property you lost and the loss occurred	Include	the amount that in	coverage for the loss surance has paid. List po 3 of Schedule A/B: Prop		Date of your loss	Value of property los
Par	t 7:	List Certain Payments or Transfe	ers					
	Includ  Includ  Perse	n 1 year before you filed for banki ulted about seeking bankruptcy of de any attorneys, bankruptcy petition No Yes. Fill in the details. Ion Who Was Paid ress il or website address	r prepari	ng a bankruptcy p	etition?			erty to anyone you Amount o paymen
	001E 378 Jers	on Who Made the Payment, if Not DebtorCC Summit Ave. sey City, NJ 07306 w.debtorcc.org	You	\$14.95			7/28/2017	\$14.9
	2222	inger Law Firm 2 E State St, Suite 107 kford, IL 61104		\$0, \$4,000.00 t plan.	o be paid through th	ne		\$0.00
	Do no	n 1 year before you filed for bank ised to help you deal with your cr ot include any payment or transfer th No Yes. Fill in the details.	editors o	et to make paymented on line 16.  Description and		alf pay o	r transfer any prope	erty to anyone who Amount o
	Addr	ress		transferred	,,,,,		or transfer was made	paymen
		n 2 years before you filed for bank ferred in the ordinary course of you				any prop	erty to anyone, othe	er than property

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

■ No

Official Form 107

☐ Yes. Fill in the details.

**Person Who Received Transfer** Address

Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

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Debtor 1 Brian C. Jeffreys

19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No							
	Yes. Fill in the details.							
	Name of trust	Description and v	alue of the property t	ransferred	Date Transfer was made			
Par	8: List of Certain Financial Accounts, Inst	truments, Safe Deposit	Boxes, and Storage	Units				
20.	Within 1 year before you filed for bankruptey	wore any financial ac	counts or instrument	e hold in your name, or for y	your honofit closed			
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No							
	Yes. Fill in the details.							
		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 yocash, or other valuables?	ear before you filed for	bankruptcy, any safe	e deposit box or other depos	sitory for securities,			
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		ribe the contents	Do you still have it?			
22.	Have you stored property in a storage unit or	r place other than your	home within 1 year b	pefore you filed for bankrupt	cy?			
LL.	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, State and ZIP Code)		ribe the contents	Do you still have it?			
Par	9: Identify Property You Hold or Control f	or Someone Else						
23.	Do you hold or control any property that som for someone.	neone else owns? Inclu	ude any property you	borrowed from, are storing	for, or hold in trust			
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		ribe the property	Value			
Par	10: Give Details About Environmental Info	rmation						
For	he purpose of Part 10, the following definitio	ns apply:						
	Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these	e air, land, soil, surface	water, groundwater,					
	Site means any location, facility, or property	as defined under any e	environmental law, wi	hether you now own, operat	e, or utilize it or used			

hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

to own, operate, or utilize it, including disposal sites.

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Debtor 1 Brian C. Jeffreys

24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?  No						
	Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of	•					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or adn	ninistrative proceeding under any envi	ironmental law? Include settlements a	nd orders.			
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	11: Give Details About Your Business or	Connections to Any Business					
27.	Within 4 years before you filed for bankrupt	cv. did vou own a business or have an	ny of the following connections to any	business?			
	■ A sole proprietor or self-employed in						
	☐ A member of a limited liability comp						
	☐ A partner in a partnership		,				
	☐ An officer, director, or managing exc	ecutive of a corporation					
	☐ An owner of at least 5% of the voting	g or equity securities of a corporation					
	■ No. None of the above applies. Go to F	art 12.					
	■ Yes. Check all that apply above and fill	in the details below for each business	S.				
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security r				
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	· ·	iumber of friiv.			
	Astonishing Lawn Care & Home	Remodeling, Lawn Care	Dates business existed EIN:				
	Remodeling	g,	From-To 2013 - 2015				
	1611 Viking Circle Rockford, IL 61107		2010 2010				
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	cy, did you give a financial statement	to anyone about your business? Inclu	de all financial			
	■ No						
	Yes. Fill in the details below.						
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued					

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Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

18 Brian C. Jeffreys

Brian C. Jeffreys

Signature of Debtor 2

Signature of Debtor 1

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

Date

■ No □ Yes

Date August 10, 2017

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing tee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-81868 Doc 1 Filed 08/10/17 Entered 08/10/17 11:44:45 Desc Main Document Page 48 of 53

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Northern District of Illinois

In r	e Brian C. Jeffreys		Case No.	
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMPE	NSATION OF ATTOR	RNEY FOR DE	CBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2010 compensation paid to me within one year before the filible rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	4,000.00
	Prior to the filing of this statement I have received		\$	0.00
	Balance Due			4,000.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed com	pensation with any other person u	unless they are mem	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na			
5.	In return for the above-disclosed fee, I have agreed to r	render legal service for all aspects	s of the bankruptcy c	ase, including:
	<ul> <li>a. Analysis of the debtor's financial situation, and rend</li> <li>b. Preparation and filing of any petition, schedules, sta</li> <li>c. Representation of the debtor at the meeting of credit</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and applications</li> <li>522(f)(2)(A) for avoidance of liens on home</li> </ul>	tement of affairs and plan which tors and confirmation hearing, an reduce to market value; exe ons as needed; preparation	may be required; d any adjourned hear mption planning;	rings thereof;
6.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any diany other adversary proceeding.	ee does not include the following		es, relief from stay actions or
		CERTIFICATION		
	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	ny agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
_	August 10, 2017	/s/ Daniel A. Sprin		
1	Date	Daniel A. Springe		
		Signature of Attorney Springer Law Firn		
		2222 E State St		
		Suite 107 Rockford, IL 6110	4	
		815.312.4725	<b>T</b>	
		dspringerlaw@gn	nail.com	
		Name of law firm		

## **United States Bankruptcy Court**Northern District of Illinois

In re				
III IC	Brian C. Jeffreys		Case No.	
		Debtor(s)	Chapter 13	
	VE	RIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	36
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	tors is true and corre	ect to the best of my

ABD FCU Attn: Bankruptcy Dept 27850 Mound Rd Warren, MI 48092-4561

Afni Attn: Bankruptcy Dept. PO Box 3097 Bloomington, IL 61702-3097

AT&T PO Box 6416 Carol Stream, IL 60197

Barrick, Switzer, Long, Balsley 6833 Stalter Drive 1st Floor Rockford, IL 61108

Caine & Weiner 21210 Erwin Street Woodland Hills, CA 91367

Citizens Finance Attn: Bankruptcy Dept. 6457 N 2nd St Loves Park, IL 61111

Comcast Attn: Bankruptcy Dept. PO Box 3005 Southeastern, PA 19398

ComEd Attn: Bankruptcy Dept. PO Box 6111 Carol Stream, IL 60197

Convergent Outsourcing Attn: Bankruptcy Dept. PO Box 9004 Renton, WA 98057

Creditors Protection Service Attn: Bankruptcy Dept. PO Box 4115 Rockford, IL 61101 Debt Recovery Solutions Attn: Bankruptcy Dept. 900 Merchants Conc Suite 106 Westbury, NY 11590

Direct TV PO Box 5007 Carol Stream, IL 60197

Dish Network LLC Attn: Bankruptcy Dept. 9601 S Meridian Blvd Englewood, CO 80112-5905

Diversified Consultants Attn: Bankruptcy Dept. PO Box 551268 Jacksonville, FL 32255

Equifax PO Box 740256 Atlanta, GA 30374

Experian PO Box 4500 Allen, TX 75013

Franks, Gerkin, & McKenna P.C. Attn: Bankruptcy Dept. 19333 E Grant HWY Marengo, IL 60152

IL Dept of HC & Family Services Attn: Bankruptcy Dept. 509 South Sixth Street Springfield, IL 62701

IL Dept. of Healthcare & Family Ser PO Box 19174 Springfield, IL 62794

Mercy Health System 1000 Mineral Point Avenue Janesville, WI 53548 Nicor Gas Attn: Bankruptcy Dept. PO Box 5407 Carol Stream, IL 60197

OrthoIllinois Box 78620 Milwaukee, WI 53278-8620

OrthoIllinois 324 Roxbury Street Rockford, IL 61107

OSF St. Anthony Med Center Attn: Bankruptcy Dept. 5510 East State St. Rockford, IL 61108-2381

Progressive Insurance 6300 Wilson Mills Road Cleveland, OH 44143

Rockford Anesthesiologists Attn: Bankruptcy Dept. 2202 Harlem Rd Loves Park, IL 61111

Rockford Health System Attn: Bankruptcy Dept. 2400 N Rockton Ave Rockford, IL 61103

Rockford Memorial Attn: Bankruptcy Dept. 2400 N Rockton Ave Rockford, IL 61103

Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108

Security Finance Corporation Attn: Bankruptcy Dept. PO Box 3146 Spartanburg, SC 29304 Swedish American Health System Attn: Bankruptcy Dept. 1401 East State Street Rockford, IL 61104

TransUnion 555 West Adams Street Chicago, IL 60661

United Credit Service PO Box 740 Elkhorn, WI 53121

Vaughn's TV & Appliance 3833 Auburn Rd Rockford, IL 61101

Winnebago County Circuit Court 400 W State St 2017 LM 476 Rockford, IL 61101

Winnebago County Circuit Court 400 W State St 2014 SC 3591 Rockford, IL 61101